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October 31, 2018

The Honorable R. Creigh Deeds
Chairman
Joint Subcommittee to Study Mental Health Services in the 21st Century
P. O. Box 5462
Charlottesville, Virginia 22905-5462
&
The Honorable Robert B. Bell
Chairman
Criminal Justice Diversion Work Group of the Joint Subcommittee to Study Mental Health Services in the 21st Century
2309 Finch Court
Charlottesville, Virginia 22911

Subject: The Virginia Association of Regional Jails' 2019 Legislative and Policy Statement in Preparation of the November 5, 2018, meeting of the Criminal Justice Diversion Work Group.

Please note: These comments also were emailed.

Dear Senator Deeds and Delegate Bell:

A number of important health care service delivery issues in jails are pending before the General Assembly including:

The Joint Health Care Commission's recent staff report entitled "Quality of Health Care Services in Virginia Jails and Prisons, and Impact on Requiring Community Services Boards to Provide Mental Health Services in Jails;"

HB 1487 (Delegate Stolle) and SB 878 (Dunnavant) from the 2018 session regarding the delivery of behavioral health services in jails; and

The ongoing work of the Joint Subcommittee Studying Mental Health Services in the 21st Century.

Additionally, the Department of Behavioral Health and Developmental Disabilities is recommending the consideration of minimum jail standards for behavioral healthcare in its recent report "Mental Health Standards for Virginia's Local and Regional Jails."

VARJ also notes JLARC's ongoing study of the Office of the State Inspector General that includes reviewing the Office's "role and authority in inspecting jails ... and in investigating incidents in jails..." The report is to be released in 2019.

This document is intended to outline VARJ's 2019 legislative and policy recommendations. It is both a reaction to the efforts listed above as well as a general statement from the 22 regional jails comprising the association.

As has been demonstrated in recent years, VARJ is interested in and committed to working with the legislative and executive branches to help formulate effective public policy.

Adoption of New Medical and Behavioral Health Care Standards (Health Care) for Jails—

VARJ supports the consideration, development and adoption of new jail operating standards regarding medical and behavioral health care by the Virginia Board of Correction (BOC).

BOC oversees the adoption of new standards in accordance with state statute. Jails are mandated to comply with all BOC standards. For example, the standards serve as the basis for BOC's mandated and unannounced jail inspections. BOC considers and adopts new standards working with a diverse group of stakeholders including jail professionals.

In addition to Virginia's jail standards, the American Correctional Association (ACA), and or the separate National Commission on Correctional Health Care (NCCHC) currently accredit many regional jails.

The adoption of jail standards requires administration and enforcement by correctional experts managed by BOC. The delivery of health care services in jails is distinctive. It is dissimilar to the delivery of health care services in traditional, non-correctional settings for obvious reasons including security concerns. Additionally, the inmate population generally is less healthy than the overall population. **VARJ recommends that new medical and behavioral health standards require the BOC to employ and oversee specialized inspectors.** Additionally, the adoption of new medical and behavioral health care standards may require additional state resources. **Therefore VARJ respectfully urges the Commonwealth to fund new mandates associated with implementing new standards.**

Community Services Boards Providing Mental Health Services in Jails—

VARJ contends that working together, the state, regional jails and local community service boards should strive to provide adequate behavioral

health care to inmates. For cost and resource reasons this objective might take several years to fully implement.

VARJ supported the referenced 2018 legislation introduced by Delegate Stolle and Senator Dunnivant including the House amendment to HB1487 mandating CSB services upon the request of the jailer, and the Senate amendment qualifying that a state appropriation is necessary for implementation of SB 878.

Several recent studies as well as contemporary evidence suggest that most regional jails work cooperatively in some form or fashion with their local CSBs. For the record and in accordance with current law, CSBs must provide jails with emergency services. For a variety of reasons, often related to a lack of resources, all CSBs currently are not capable of providing continuing inmate care. The Stolle and Dunnivant bills begin to address the funding questions. An additional complicating factor is that multiple CSBs often are located in a single regional jail's geographical area making the service relationships more challenging to define. And it is important to remember that an inmate is able to locate or relocate to any jurisdiction upon release, i.e. he is not obligated to return to his previous home or CSB.

In recognition of these realities and as identified in recent reports, regional jails provide behavioral health care through a variety of mechanisms including public and private agreements and contracts. It also is important to note that several regional jails contract with a single health care provider for medical and behavioral health care as well as pharmaceuticals. These contracts often provide efficient, effective and holistic services that serve to benefit the patients, jails and taxpayers.

In the near term and as an important first step to expand CSB services working with the jails, VARJ recommends that the state significantly increase discharge-planning dollars. A robust and uniform statewide discharge-planning program will help to reduce jail populations and facilitate critical community based services. As a reminder, this Joint Subcommittee advanced the adoption of a limited discharge planning pilot program last session:

Chapter Two, Item 312., MM. Out of this appropriation, \$1,600,000 the first year and \$1,600,000 the second year from the general fund is provided for discharge planning at jails for individuals with serious mental illness. Funding shall be used to create staff positions in Community Services Boards and will be implemented at two jails with a high percentage of inmates with serious mental illness.

Lastly, VARJ commends to the readers a recent study by Blythe Alison Bowman Balestrieri, Ph. D. Professor Balestrieri is with VCU and her study is entitled "2017-2018 Statewide Study on Jail Healthcare Delivery." In short, Dr. Balestrieri finds that despite serving a challenging population, Virginia's jails endeavor to provide

essential medical and behavioral health services. The link is to a study overview that Professor Balestrieri provided to Delegate Bell's Criminal Diversion Work Group October 1 of this year: <http://dls.virginia.gov/groups/mhs/jailhealthcare.pdf>

Thank you for the opportunity to comment.

Sincerely,

A handwritten signature in black ink, appearing to read 'William C. Smith', with a long horizontal flourish extending to the right.

William C. Smith
Superintendent